Stressors, Forces, and Resiliency

An interview with Michael J. Shea

By Andrew Rosenstock, Certified Rolfer®, and Michael J. Shea, PhD

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ABSTRACT *Biological, cultural, technological, and cosmological forces act on the human system, and when those forces become stressors that exceed a system's capacity. Michael J. Shea, PhD, traces how pre- and perinatal overwhelm reduces the margin available for later demands. Shea speaks of an "era of grief," a collective condition placing sustained pressure on everyone's well-being.*

Opening Frame

This interview is drawn from several conversations recorded across four episodes of the *Touching Into Presence podcast.*[1] Rather than presenting those exchanges separately, we've woven them together here – allowing recurring questions, images, and tensions to gather into a single, cohesive conversation. What follows is not a transcript of one sitting, but a synthesis that reflects how these themes unfolded over time.

Across those four talks, we kept returning to a shared inquiry: how forces – biological, cultural, technological, developmental, and collective – act on the human system; how and when those forces become stressors; and how resiliency may be less about endurance and more about the restoration of capacity. This conversation doesn't aim to resolve those questions, but to stay with them long enough for something honest to appear.

Our Conversation

Andrew Rosenstock: Across our conversations, we keep circling back to the idea that the human system is under a lot of input – almost like a constant bodily load. When you look at the landscape of health right now, what do you see as the primary forces acting on us?

Michael J. Shea: One of the biggest is social media and the way it shapes perception. It's a pervasive environmental force that changes how we relate to ourselves and the world. Alongside that are the ongoing internal forces – metabolic health, vascular health, and the continuous biological demands that never really turn off. And then there's primary respiration, which I see as a fundamental force moving within the system itself.

Andrew: You often talk about these forces as being nested inside something larger.

Michael: Yes. I don't see the body as existing in isolation. There are larger cultural, cosmological, and spiritual frameworks acting on us all the time. My background in Buddhist psychology, studying with the Dalai Lama, and apprenticing with a medicine man on the Navajo reservation all shaped how I understand those influences. They give context to how spiritual and energetic forces are always in play, even when we're not naming them.

Andrew: And then there are the metrics modern culture imposes.

Michael: Exactly. Take *body mass index* (BMI). It's an outdated metric based on myths, yet it carries enormous authority. It pressures people to judge their bodies against a number that has very little to do with lived reality.

Michael J. Shea: I don't see the body as existing in isolation. There are larger cultural, cosmological, and spiritual frameworks acting on us all the time.

Andrew: You also speak about what you call the 'era of grief'.

Michael: Yes. That's a global force. A collective condition that places sustained pressure on the heart and on spiritual well-being. In this era, heart health, metabolism, and meaning are deeply linked. Each one exerts force on the others.

Andrew: Even the forces we apply intentionally in clinical work fit into this.

Michael: They do. Whether it's Rolfing® [Structural Integration], myofascial work, or biodynamic cardiovascular therapy, we're applying force. In cardiovascular work, we even use visual and energetic forces – like the five heart colors from

Michael J. Shea: Stressors manifest as blocked pathways in the cardiovascular system. Because heart health, metabolism, and spiritual well-being are linked, stress in one area places demand on the others. In the era of grief, that sustained pressure often shows up as a lack of vitality in the heart, with long-term metabolic and vascular consequences.

'Medicine Buddha' practice – to support the heart.

Andrew: And sometimes the forces are very immediate – technology, travel, and environment.

Michael: Yes. Poor audio connections, internet outages, jetlag. These seem trivial, but they place real demands on presence and speech. All of this – biological, technological, cultural, cosmological – belongs to what I call *the living mystery of being*.

Stressors

Andrew: At what point do these forces stop being background conditions and start exceeding a system's capacity?

Michael: One place we see that very clearly is in pre- and perinatal trauma. That's where capacity is overwhelmed before the nervous system has the resources to meet what's happening. I see this clinically in infants and children with neurological issues and developmental delays – but those early loads don't disappear. They're often carried into adulthood.

Andrew: So the system organizes around overwhelm early on.

Michael: Exactly. And later in life, when additional demands appear, the system is already working from a reduced margin.

Andrew: You see something similar with cultural metrics like BMI.

Michael: Very much so. BMI becomes a stressor when it's internalized. Once someone lets that metric define their sense of self, it creates body shame. That shame disrupts interoceptive awareness – the ability to sense the body from the inside – and fractures the relationship with the body itself.

Andrew: Instead of sovereignty, there's fragmentation.

Michael: Yes. The body becomes something to manage or correct rather than inhabit.

Andrew: And biologically, this shows up in the heart and metabolic system?

Michael: It does. Stressors manifest as blocked pathways in the cardiovascular system. Because heart health, metabolism, and spiritual well-being are linked, stress in one area places demand on the others. In the era of grief, that sustained pressure often shows up as a lack of vitality in the heart, with long-term metabolic and vascular consequences.

Andrew: Even small environmental disruptions can tip things.

Michael: They can. Jetlag combined with technical disruptions is a good example. Presence feels less settled. Speech changes. These are modern stressors that directly affect the nervous system's ability to engage.

Resiliency

Andrew: If stressors are already layered on top of early overwhelm, what does recovery look like if it's not just about pushing through?

Michael: It requires stepping away from a purely biomechanical model that treats the body as something to fix. In a biodynamic approach, healing isn't something we impose – it's always here. The question is whether the system has the conditions to access it.

Andrew: That's where your work with the biodynamic heart comes in.

Michael: Yes. We use somatic compassion practices to support a clear and vital heart, especially in the era of grief. Interoceptive awareness is central here. It gives the system sovereignty – the ability to remain centered and self-regulated even when external forces are intense.

Andrew: You even extend this into daily activities, like eating.

Michael: Absolutely. Contemplative eating practices help the body absorb metabolic load rather than compensate for it unconsciously. It's another way of restoring relationship instead of overriding sensation.

Andrew: And in cardiovascular work, you go beyond physical touch.

Michael: We combine touch, primary respiration, and visualization – like the five heart colors – to unblock pathways in the heart. Because these systems are linked, supporting one supports the whole.

Cost, Capacity, and Stillness

Andrew: There's a real cost in all of this. I think about moments when presence itself feels compromised.

Michael: That cost often shows up as subtle changes – speech, pacing, a sense of not being fully there. The system is adapting, but under strain. From the outside, everything may look fine.

Andrew: That's where resilience gets confused with endurance.

Michael: Exactly. Endurance can look impressive, but it often means the system is compensating. True resiliency is about restoring capacity, not tolerating more.

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Andrew: Which brings us back to development.

Michael: Yes. If capacity was overwhelmed early, pre- or perinatally, then later stressors land very differently. What looks like an overreaction is often an honest response from a system already carrying unfinished business.

Andrew: So healing becomes less about intervention and more about allowing something to complete.

Michael: That's right. Stillness is essential here – not passivity, but a dynamic stillness where the system can sense itself without being overwhelmed. When we stop forcing adaptation, the system reorganizes according to its inherent capacity.

Closing Frame

As the conversation comes to a pause, one thing remains unsolved. If resilience is not the ability to tolerate more, and if many stress responses reflect intelligent adaptations to conditions that once exceeded capacity, then the question shifts. Rather than asking how to become stronger or more resilience, we are left with a quieter – and more demanding – consideration:

What conditions allow capacity to return?

Endnotes

1. The *Touching Into Presence* podcast is an interview show where Andrew Rosenstock and his team talk with a global community of bodyworkers. They published the first episode on May 5, 2020, and now have over 90 episodes of authentic, informative conversations with structural integrators, bodyworkers, yoga teachers, healers, movement therapists, and academic experts of many kinds. Rosenstock asks what inspires them, what brought them to where they are now in their careers, and what their approach is for addressing the wellness of the body, mind, and beyond. All episodes are available at https://open.spotify.com/show/5LIswp0FKjDqRaQFJ9VnG9. Conversations with Michael J. Shea, PhD, can be found on:

- Episode 51 (March 28, 2022),
- Episode 58 (October 3, 2022),
- Episode 66 (August 14, 2023), and
- Episode 93 (August 18, 2025).

Michael J. Shea, PhD, is an educator and author in the fields of somatic psychology, myofascial release, and craniosacral therapy. He leads seminars throughout the United States, Canada, and Europe. Shea received his master's degree in Buddhist Psychology at Naropa University and a doctorate in Somatic Psychology at The Union Institute. He has been a Florida-licensed massage therapist since 1976, completed his Rolfing training in the early 1980s, and was a Certified Craniosacral Instructor with Upledger Institute in 1986. Shea brings a unique cross-cultural perspective to teaching health and healing, with a teaching style grounded in a spiritual practice of developing compassion with the use of manual therapy. For more information see www.sheaheart.com. Shea's books include The Biodynamics of the Immune System: Balancing the Energies of the Body with the Cosmos *(2023) and* The Biodynamic Heart: Somatic Compassion Practices for a Clear and Vital Heart *(2025), are now available at Inner Traditions and Amazon. Shea has a new book to be available soon,* Biodynamic Embryology, Morphology, Mythology, and Clinical Practice*.*

Andrew Rosenstock is a Certified Rolfer®, Registered Somatic Movement Therapist, Biodynamic Craniosacral Therapist, Board Certified Structural Integrator, Certified Yoga Therapist (C-IAYT 1000), meditation teacher, and educator. Find out more at rolfinginboston.com and andrewrosenstock.com.

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